

## LECTURE PRESENTATION

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# Old men hyperthyroidism

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*From* de Senectute: Age and Health Forum  
Catanzaro, Italy. 5-7 December 2009

Even the thyroid, like all the other organs and tissues, has undergone anatomic-functional modifications during the senescence. One of the characteristics of ageing is the significant increase of thyroid disease and their different clinical expression. Moreover, thyroid disease in older patients requires special attention because of the increased gravity caused by the frequent co-existence of other pathologies or the greater risk of pharmacological interferences and a lower metabolism of the drugs. In particular, hyperthyroidism in old men is a pathology that should not be undervalued because of the peculiarity of the clinical and prognostic aspects which characterize this age.

The prevalence of hyperthyroidism increases 7 times in people over sixty-five years old and, including the subclinical hyperthyroidism; the percentage of people over sixty-five years old oscillates from 0,7% to 4% according to the casuistry.

The most frequent causes of hyperthyroidism in old men are the toxic multinodular goiter and the autonomously functioning solitary nodules, which in the iodineless areas represent over the 70% of the causes; moreover hyperthyroidism exogenous (iodine and iodate compounds, like amiodarone, means of radiological contrast, ingestion of intentional or unintentional suppressive doses of thyroid hormone).

The clinical manifestations of hyperthyroidism are peculiar and they are often different in old men with respect to young men.

In old men the apatetica production is frequent with not many aspecific symptoms and cardiovascular complications (atrial fibrillation or other arrhythmias).

Also the therapy is different in old men with respect to young men. In fact it must be individualized not only because of the causes, but also the age, by the risk

factors of cardiovascular illnesses and by the presence of others illnesses, too.

Published: 19 May 2010

doi:10.1186/1471-2318-10-S1-L22

**Cite this article as:** Giuliano: Old men hyperthyroidism. *BMC Geriatrics* 2010 **10**(Suppl 1):L22.

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